24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) WORKING FOR WORKING AMERICANS - FEDERAL	FEC IDENTIFICATION NUMBER ▼ C C00490847
Check If 24-hour report 48-hour report New report Amends report filed	I on M M / D D / Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee Mosaic Mailing Address 4801 Viewpoint Place	Date
City State Zip Code	Amount 15050.00
Cheverly MD 20781 Purpose of Expenditure Category/ Office	Transaction ID : SE.4136 te Sought: House State: DC
Purpose of Experiditure Placards/Banners/Bumper Stickers Category/ Type One Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: President
BARACK OBAMA Chec	ck One: Support Oppose
Calendar Year-To-Date Per Election 16950.00 Disb 2012	oursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type Office	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Check	President Oppose
Calendar Year-To-Date Per Election for Office Sought	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	16950.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	16950.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
R. Phil Newkirk [Electronically Filed] Date 1	0 08 2012
Signature	